DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			Attorney Docket Num	ıber	086523-000000US		
			First Named Inventor		Kai Waslowski, et al.		
(37 CFR 1.63)		COMPLETE IF KNOWN					
			Application Number				
Declaration Submitted With Initial C		Declaration Submitted after Initial	Filing Date				
	OR	Filing (surcharge	Art Unit				
		(37 CFR 1.16(e)) required)	Examiner Name	Unassig	ned		

	required)	Examiner Name	Unassigne	ed				
As the below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
DISTANCE DETERMINATION								
	*							
	(Title of	the Invention)						
the specification of which is attached hereto	·	,						
_								
OR	· _ ^							
Uses filed on (MMM/D								
was filed on (MM/DD/YYYY) as United States Application Number or PCT International								
Application Number and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-								
part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign pri	ority benefits under 35 U.S.	C. 119(a)-(d) or (f), or 36	5(b) of any fore	ign application(s) f	for patent, inventor's or			
United States of America,	tificate(s), or 365(a) of any l listed below and have also	identified below, by chec	king the box, an	y foreign application	on for patent, inventor's			
or plant breeder's rights or priority is claimed.	ertificate(s), or of any PCT	international application h	aving a filing da	te before that of th	ne application on which			
Prior Foreign Application		Foreign Filing Date	Priority	Certified	Copy Attached?			
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO			
100 59 156,6	Germany	11/29/00						
Additional foreign applica	tion numbers are listed on a sun	International priority data shoot	PTO/SB/02B attac	had harata:	<u> </u>			

[Page 1 of 3]

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## **DECLARATION** — Utility or Design Patent Application

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Name							
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST IN	/ENTOR:	☐ A :	etition	has bee	n filed	for this unsigned inv	entor
Kai Given Name (first and middle [if any])				WASLOWSKI Family Name or Surname			
Inventor's Signature							Date
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NAME OF SECOND INVENTOR	₹:	A;	etition	n has bee	en filed	for this unsigned in	rentor
Gerhard Given Name (first and middle [if any])				MERETTIG Family Name or Surname			
Inventor's Signature							Date
Sexau Residence: City State				Germany Country			DE Citizenship
Siedlungsweg 1 Mailing Address							
Sexau City	Sta	State			9350 (IP	Germany Country	
Additional inventors are bein	g named on the	ne supr	olement	el Addition	al Invento	or(s) sheet(s) PTO/SB/02	A attached hereto.

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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>

Name of Additional Joint Invento	r, if any:	☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Siegfried		RINGWALD				
Inventor's Signature			Date			
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Mailing Address Wellishöfe 5a	<u>.</u>					
Mailing Address						
City Elzach	y Eizach State ZIP		Germ <b>a</b> ny <b>Country</b>			
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Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State	Country	Citizenship			
Mailing Address						
Mailing Address						
City	State	ZIP	Country			
Name of Additional Joint Invente	or, if any:	☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State .	Country	Citizenship			
Mailing Address						
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